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## FACSIMILE COVER SHEET

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	TO:	Examiner Aaron Austin	artlinit	1794
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	FROM:	Jonathan H. Spadt		
	FAX TELEPHONE:	1 571 273 8300		
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7	TITLE OF DOCUMENT:	COPY OF IPER DOCUMENT FOR APPLICATION		

Total Number of Pages: Z (including this form)

## **COMMENTS**

Pursuant to your voicemail regarding the above application, attached is a copy of the IPER which was submitted with the initial filing of the above U.S. National Phase application. The claims were amended in the IPER and further amended in the Preliminary Amendment submitted with the initial application. Please let me know if you have any further questions. Thank you.

## CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION

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